

Testimony: Public Health Committee - March 15, 2013
An Act Concerning the Establishment of a Palliative Care and Quality of life
Interdisciplinary Advisory Council SB 991

My name is Susan Richter. I am a registered nurse and I served as the Vice President of Quality of Life for the American Cancer Society for 23 years. In 1989 I initiated the creation of the CT Cancer Pain Initiative where our goal was to eliminate barriers and improve access to pain relief in CT. Currently, I am a two time cancer survivor and serve as the Co-Chair of the Survivorship Committee of the CT Cancer Partnership and I am here today in support of Senate Bill 991.

There is no doubt that there has been wonderful progress made in the treatment of cancer today, however there is still a need for significant improvement in quality of life, as patients live longer and reap the benefits that current therapies offer. I believe that along with the modern treatments we cannot forget the patient's comfort. These concerns are often overlooked while the focus is primarily on the latest treatment modality. I often hear from patients, and their family members, that are suffering from serious illness and are looking for ways to relieve symptoms from their disease, such as pain, nausea, depression, difficulty breathing.

Support for senate Bill 991 would establish an interdisciplinary council of select experts in the health care field that can review current palliative care policies, look for the deficits and together work toward improved and enhanced quality of life for all persons in Connecticut with a serious illness.

The concept of palliative care is somewhat new for many Americans, and the term palliative may be unfamiliar, but the philosophy of palliative care is one shared by many: *that people with serious illness need not suffer.*

Palliative Care is a term often mistaken for end of life care. While standard care for chronic illness focuses on treatment of the disease, palliative care is a comprehensive approach to treating serious illness that focuses on the physical, psychosocial, and spiritual needs of the patient and their loved ones. Its goal is to achieve the best quality of life available by relieving suffering, controlling pain and symptoms, and enabling the individual to live as normal a life as possible.

In other words, the goal of palliative care is to prevent, reduce, or relieve symptoms of a disease like cancer. The focus is on care, independent from efforts to cure the disease, but the two are not exclusive, and palliative care integrates both symptom control and cancer treatment.

Palliative care can help a patient at any age or stage of a serious illness. Early on, when curing the disease is the goal, palliative care focuses on reducing symptoms, managing patient distress, and providing support. Pain management, control of nausea and vomiting, and counseling for anxiety and depression are examples of palliative care approaches that can help people with a serious illness live as well as possible. There is

evidence that palliative care can also improve survival.

As a disease advances, the number and intensity of symptoms tend to increase. At this stage, members of a palliative care team can try to relieve pain and other distressing symptoms and to provide care that supports a person's comfort. As the end of life nears, the team guides and supports the person and their family through transitions in care and helps patients address issues of life completion.

The Palliative care team consists of a team of qualified health professionals and other specialists. They work together in a team-based approach in hospitals and home care settings to address the needs of life-threatening illnesses.

All patients deserve and should expect to have their care delivered by knowledgeable and sensitive health care providers. This bill can provide an opportunity to create a common understanding among providers that in turn will allow creation of a state wide palliative care plan for the citizens of Connecticut when they find themselves in need.

This approach is responsive to personal needs, wishes, and values, and it aims to prevent, reduce or relieve the symptoms of a disease and improve the quality of life for a person with a serious illness and his or her loved ones and caregivers.

Susan Richter
203-257-1915